

POLICE ACCIDENT REPORT (NYC)									
MV-104AN (5/04)									
AMENDED REPORT									
Precinct		Accident No.		Complaint Number		No. of Vehicles		No. Injured	
010		#458		411		1		1	
Month		Day		Year		Day of Week		Military Time	
02		25		2007		SUN		2120	
Not Investigated at Scene		Left Scene		Police Photos		Reconstructing			
<input type="checkbox"/>		<input type="checkbox"/>		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		<input type="checkbox"/>	
VEHICLE 1					VEHICLE 2				
VEHICLE 1 - Driver					VEHICLE 2 - Driver				
License ID Number					License ID Number				
P34625447902555					D1251187				
Driver Name - exactly as printed on license					Driver Name - exactly as printed on license				
MICHAEL R PHILIPS					SABINA BEATA PARADI				
Address (Include Number & Street)					Address (Include Number & Street)				
2 ROBIN ROAD					116 GATETREE CT				
City or Town					City or Town				
RUMSON					DANVILLE				
State					State				
NJ					CA				
Zip Code					Zip Code				
07760					94526				
Date of Birth		Sex		Unlicensed		No. of Occupants		Public Property Damaged	
02/20/55		M		<input type="checkbox"/>		1		<input type="checkbox"/>	
Date of Birth		Sex		Unlicensed		No. of Occupants		Public Property Damaged	
04/19/83		F		<input type="checkbox"/>				<input type="checkbox"/>	
Name - exactly as printed on registration					Name - exactly as printed on registration				
MICHAEL R PHILIPS					SABINA BEATA PARADI				
Address (Include Number & Street)					Address (Include Number & Street)				
2 ROBIN ROAD					116 GATETREE CT				
City or Town					City or Town				
RUMSON					DANVILLE				
State					State				
NJ					CA				
Zip Code					Zip Code				
07760					94526				
Plate Number		State of Reg.		Vehicle Year & Make		Vehicle Type		Ins. Code	
CMP88D		NJ		1988 CHEVY PU		903			
Ticket/Arrest Number(s)					Ticket/Arrest Number(s)				
SUM# OAC8786982									
Violation Section(s)					Violation Section(s)				
4-03(A)(1)I									
Check if involved vehicle is:					Check if involved vehicle is:				
<input type="checkbox"/> more than 95 inches wide;					<input type="checkbox"/> more than 95 inches wide;				
<input type="checkbox"/> more than 34 feet long;					<input type="checkbox"/> more than 34 feet long;				
<input type="checkbox"/> operated with an overweight permit;					<input type="checkbox"/> operated with an overweight permit;				
<input type="checkbox"/> operated with an overdimension permit;					<input type="checkbox"/> operated with an overdimension permit;				
VEHICLE 1 DAMAGE CODES					VEHICLE 2 DAMAGE CODES				
Box 1 - Point of Impact					Box 1 - Point of Impact				
Box 2 - Most Damage					Box 2 - Most Damage				
Enter up to three more Damage Codes					Enter up to three more Damage Codes				
Vehicle Towed: By N/A					Vehicle Towed: By				
Vehicle Towed: To					Vehicle Towed: To				
VEHICLE DAMAGE CODING:					VEHICLE DAMAGE CODING:				
1-13. SEE DIAGRAM ON RIGHT.					1-13. SEE DIAGRAM ON RIGHT.				
14. UNDERCARRIAGE					17. DEMOLISHED				
15. TRAILER					18. NO DAMAGE				
16. OVERTURNED					19. OTHER				
Reference Marker					Coordinates (if available)				
					Latitude/Northing:				
					Longitude/Easting:				
Place Where Accident Occurred:					Place Where Accident Occurred:				
<input type="checkbox"/> BRONX <input type="checkbox"/> KINGS <input checked="" type="checkbox"/> NEW YORK <input type="checkbox"/> QUEENS <input type="checkbox"/> RICHMOND					<input type="checkbox"/> BRONX <input type="checkbox"/> KINGS <input checked="" type="checkbox"/> NEW YORK <input type="checkbox"/> QUEENS <input type="checkbox"/> RICHMOND				
Road on which accident occurred					Road on which accident occurred				
W 37 STREET					W 37 STREET				
(Route Number or Street Name)					(Route Number or Street Name)				
at 1) intersecting street					at 1) intersecting street				
9th AVENUE					9th AVENUE				
(Route Number or Street Name)					(Route Number or Street Name)				
or 2) _____					or 2) _____				
Feet Miles					Feet Miles				
(Milepost, Nearest Intersecting Route Number or Street Name)					(Milepost, Nearest Intersecting Route Number or Street Name)				
Accident Description/Officer's Notes									
AT TPO VEH. 1 WAS TRAVELING W/B ON W 37 STREET ON									
RTS OF LANE @ ILS OF 96 AVE, WHEN VEHICLES PASSED ON LEFT SIDE									
OF LANE VEH. #1 PROCCEEDED TO MAKE A LEFT TURN ONTO S/B 9th									
STRIKING PEDESTRIAN WALKING E/B ON SOUTH CROSSWALK.									
Names of all involved									
Date of Death Only									
MICHAEL R PHILIPS									
SABINA BEATA PARADI									
Officer's Rank and Signature									
P.O. [Signature]									
Print Name in Full									
LOUKOPOULOS									
Tax ID No.									
925633									
NCIC No.									
03030									
Precinct									
HWY3									
Post/Sector									
308									
Reviewing Officer									
[Signature]									
Date/Time Reviewed									
2/28/07									



<b>PEDESTRIAN/BICYCLIST/OTHER PEDESTRIAN ACTION</b> 1. Crossing, With Signal 2. Crossing, Against Signal 3. Crossing, No Signal, Marked Crosswalk 4. Crossing, No Signal or Crosswalk 5. Riding/Walking/Skating Along Highway With Traffic 6. Riding/Walking/Skating Along Highway Against Traffic 7. Emerging from in Front of/Behind Parked Vehicle 8. Going to/From Stopped School Bus 9. Getting On/Off Vehicle Other Than School Bus 11. Working in Roadway 12. Playing in Roadway 13. Other Actions in Roadway * 14. Not in Roadway (Indicate) *			<b>TRAFFIC CONTROL</b> 1. None 2. Traffic Signal 3. Stop Sign 4. Flashing Light 5. Yield Sign 6. Officer/Guard 7. No Passing Zone 8. RR Crossing Sign 9. RR Crossing Flashing Light 10. RR Crossing Gates 11. Stopped School Bus-Red Lights Flashing 12. Construction Work Area 13. Maintenance Work Area 14. Utility Work Area 15. Police/Fire Emergency 16. School Zone 20. Other *			<b>LIGHT CONDITIONS</b> 1. Daylight 2. Dawn 3. Dusk 4. Dark-Road Lighted 5. Dark-Road Unlighted			<b>ROADWAY CHARACTER</b> 1. Straight and Level 2. Straight and Grade 3. Straight at Hillcrest 4. Curve and Level 5. Curve and Grade 6. Curve at Hillcrest			<b>ROADWAY SURFACE CONDITION</b> 1. Dry 2. Wet 3. Muddy 4. Snow/Ice 5. Slush 6. Flooded 0. Other *			<b>WEATHER</b> 1. Clear 2. Cloudy 3. Rain 4. Snow 5. Sleet/Hail/Freezing Rain 6. Fog/Smog/Smoke 0. Other *		
<b>New York State</b> <b>Department of Motor Vehicles</b> <b>POLICE ACCIDENT REPORT</b> <b>MV-104A (7/01)</b> <hr/> <b>*EXPLAIN IN ACCIDENT DESCRIPTION</b> If a question DOES NOT APPLY, enter a dash (-). If an answer is UNKNOWN, enter an "X".						<b>LOCATION OF MOST SEVERE PHYSICAL COMPLAINT</b> 1. Head 2. Face 3. Eye 4. Neck 5. Chest 6. Back 7. Shoulder-Upper Arm 8. Elbow-Lower Arm-Hand 9. Abdomen - Pelvis 10. Hip-Upper Leg 11. Knee-Lower Leg-Foot 12. Entire Body											
<b>WHICH VEHICLE OCCUPIED</b> 1. Vehicle No. 1 A. All-Terrain Vehicle (ATV) O. Other * 2. Vehicle No. 2 B. Bicyclist P. Pedestrian I. In-Line Skater S. Snowmobiler						<b>POSITION IN/ON VEHICLE</b> 1. Driver 2-7. Passengers 8. Riding/Hanging on Outside											
<b>SAFETY EQUIPMENT USED</b> 1. None 2. Lap Belt 3. Harness 4. Lap Belt/Harness 5. Child Restraint Only 6. Helmet (Motorcycle Only) 7. Air Bag Deployed 8. Air Bag Deployed/Lap Belt 9. Air Bag Deployed/Harness A. Air Bag Deployed/Lap Belt/Harness B. Air Bag Deployed/Child Restraint						<b>EJECTION FROM VEHICLE</b> 1. Not Ejected 2. Partially Ejected 3. Ejected											
<b>In-Line Skater/Bicyclist</b> C. Helmet Only D. Helmet/Other E. Pads Only F. Stoppers Only 0. Other *						<b>TYPE OF PHYSICAL COMPLAINT</b> 1. Amputation 2. Concussion 3. Internal 4. Minor Bleeding 5. Severe Bleeding 6. Minor Burn 7. Moderate Burn 8. Severe Burn 9. Fracture - Dislocation 10. Contusion - Bruise 11. Abrasion 12. Complaint of Pain 13. None Visible 14. Whiplash											
<b>VICTIM'S PHYSICAL AND EMOTIONAL STATUS</b> 1. Apparent Death 2. Unconscious 3. Semiconscious 4. Incoherent 5. Shock 6. Conscious						<b>INJURED TAKEN</b> 17 BY TO 18											
<b>PRE-ACCIDENT VEHICLE ACTION</b> 1. Going Straight Ahead 2. Making Right Turn 16. Making Right Turn on Red 3. Making Left Turn 17. Making Left Turn on Red 4. Making U Turn 5. Starting from Parking 6. Starting in Traffic 7. Slowing or Stopping 8. Stopped in Traffic 9. Entering Parked Position 10. Parked 11. Avoiding Object in Roadway 12. Changing Lanes 13. Passing 14. Merging 15. Backing 18. Police Pursuit 20. Other *						<b>LOCATION OF FIRST EVENT</b> 1. On Roadway 2. Off Roadway											
<b>TYPE OF ACCIDENT -- COLLISION WITH</b> 1. Other Motor Vehicle 6. In-Line Skater 2. Pedestrian 7. Deer 3. Bicyclist 8. Other Pedestrian 4. Animal 10. Other Object (Not Fixed)* 5. Railroad Train						<b>COLLISION WITH FIXED OBJECT</b> 11. Light Support/Utility Pole 12. Guide Rail-Not At End 25. Guide Rail-End 13. Crash Cushion 14. Sign Post 15. Tree 16. Building/Wall 17. Curbing 18. Fence 19. Bridge Structure 20. Culvert/Head Wall 21. Median-Not At End 26. Median-End 27. Barrier 22. Snow Embankment 23. Earth Embankment/Rock Cut/Ditch 24. Fire Hydrant 30. Other Fixed Object*											
<b>NO COLLISION</b> 31. Overturned 32. Fire/Explosion 33. Submersion 34. Ran Off Roadway Only 40. Other*						<b>COVER SHEET</b> N											

